



PERSONNEL AND
READINESS

UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
WASHINGTON, D.C. 20301-4000



13 DEC 2004

MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS
CHAIRMAN OF THE JOINT CHIEFS OF STAFF
UNDER SECRETARIES OF DEFENSE
ASSISTANT SECRETARIES OF DEFENSE
GENERAL COUNSEL OF THE DEPARTMENT OF DEFENSE
DIRECTOR, OPERATIONAL TEST AND EVALUATION
INSPECTOR GENERAL OF THE DEPARTMENT OF DEFENSE
ASSISTANTS TO THE SECRETARY OF DEFENSE
DIRECTOR, ADMINISTRATION AND MANAGEMENT
DIRECTOR, PROGRAM ANALYSIS AND EVALUATION
DIRECTOR, NET ASSESSMENT
DIRECTOR, FORCE TRANSFORMATION
DIRECTORS OF DEFENSE AGENCIES
DIRECTORS OF THE DOD FIELD ACTIVITIES

SUBJECT: Training Standards for DoD Personnel on Sexual Assault Prevention & Response
(JTF-SAPR-007)

This directive-type memorandum establishes Department of Defense (DoD) policy for providing the minimum training required for the prevention and response to sexual assaults, as required by Section 577(b) (3), (4), and (6) of the Ronald W. Reagan National Defense Authorization Act for Fiscal Year 2005, P. L. 108-375, October 28, 2004, which is part of DoD's comprehensive policy on the prevention and response to sexual assaults involving members of the Armed Forces.

The policy objective is to establish the minimum baseline training requirements for members of the Armed Forces. Sexual assaults are detrimental to mission readiness. It is essential that Service members understand what constitutes a sexual assault, how to avoid becoming a victim, and to be aware of the steps to take if victimized. The standard DoD definition of sexual assault will be used in all training programs.

Effective immediately, the Military Services shall implement the following required training:

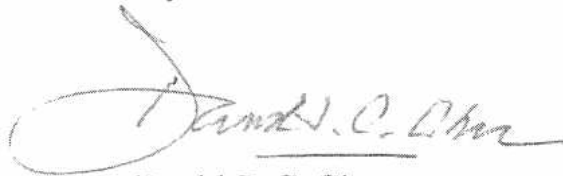
- Upon release of new DoD policy and standards, conduct initial Sexual Assault Prevention and Response training of all Service members.



- Provide Sexual Assault Prevention and Response training during all initial entry training, to include initial officer training programs. The focus of this training is to ensure that service members have a working knowledge of what constitutes a sexual assault, why it is a crime, and the meaning of consent. Additionally, members should understand the full range of reporting options available to them.
- Conduct an annual sexual assault awareness training update. The Care for Victims of Sexual Assault Task Force Report emphasized that training needs are not satisfied by simply using a lecture and Power Point presentation. To help Service members to understand the often complex nature of sexual assaults in the military, this training will be scenario based, using real-life situations to demonstrate the entire cycle of reporting, response, and accountability procedures. Training should include total group participation.
- Incorporate Sexual Assault Prevention and Response training into all leadership development and Professional Military Education (PME) programs. PME is designed to develop our leaders at all ranks. It is critical that DoD adopt policies, programs, and procedures to address the sexual assault issue, but these steps alone are not enough to put an end to the sexual assault problem in the military. Constant emphasis is required, accompanied with the clear, immutable commitment of leaders and commanders at all levels. PME offers a venue to challenge in-grained assumptions, discuss leadership's responsibility to establish a climate that proscribes sexual assault and equips leaders with the tools to do this.

Please immediately identify an office of primary responsibility for Sexual Assault Prevention and Response training. All Military Services shall submit a copy of their implementing guidance that conforms to the requirements of this policy not later than February 1, 2005. My POC for this action is Brigadier General K.C. McClain, Commander, Joint Task Force for Sexual Assault Prevention and Response.

This guidance establishes DoD policy on sexual assault matters. This memorandum is effective immediately. This and other sexual assault policies will be consolidated in a DoD issuance within 180 days.



David S. C. Chu



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DEC 17 2004



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SUBJECT: Response Capability for Sexual Assault (JTF-SAPR-008)

This directive-type memorandum establishes DoD policy for the response and support for victims of reported sexual assault in the Military, Section 577(b) (3), (4), and (6) of the Ronald W. Reagan National Defense Authorization Act for Fiscal Year 2005, P. L. 108-375, October 28, 2004, and which is part of the comprehensive policy that the Secretary of Defense is to develop for the Department of Defense on the prevention and response to sexual assaults involving members of the Armed Forces. The comprehensive DoD policy is to address several matters, including guidelines for providing immediate full-spectrum sexual assault response capability for victims of reported sexual assault. The objective of this response capability is to ensure Service accountability and victim access to timely professional services.

All Armed Services shall develop Service-specific policy that establishes immediate response capability for each report of sexual assault in all locations, including deployed locations, to ensure timely access to appropriate victim services. This policy will include designation and responsibilities of Sexual Assault Response Coordinators and Victim Advocates, and adoption of guidelines for rapid response, including identification of first responders, requisite training for personnel, and the conduct of case management as outlined below.

All Services shall establish the position of Sexual Assault Response Coordinator. The Sexual Assault Response Coordinator is considered the center of gravity when it comes to ensuring that victims of sexual assault receive appropriate and responsive care. They will



serve as the single point of contact to coordinate sexual assault victim care. The term Sexual Assault Response Coordinator will be a standardized term utilized throughout DoD and the Services to facilitate communication and transparency regarding sexual assault response capability. The Services shall establish the appropriate geographic or unit responsibility of the Coordinator and ensure that a victim receives timely access to appropriate services. The Sexual Assault Response Coordinator may be, at the Services discretion, military, DOD civilian or contractor. It is essential that the Sexual Assault Response Coordinator reports to a Commander designated by the Services, who is at a level of command commensurate with the maturity and experience essential to the responsibilities involved.

The Sexual Assault Response Coordinator will be responsible for tracking the services provided to the victim from initial report of a sexual assault, through disposition and resolution of the victim's health and well-being. The Coordinator will have oversight responsibility for the Victim Advocate; serve as chairperson of a case management group that meets monthly; track the dispositions of all military sexual assault cases for their designated area of responsibility; and provide regular updates to the commander responsible for overseeing the Sexual Assault Response Coordinator on the disposition status of a case. The Coordinator will be responsible for assisting Commanders in meeting annual sexual assault prevention and response training requirements, including newcomer and orientation briefings and will provide community education regarding available sexual assault prevention and response services. Specific reporting requirements will be defined and communicated in a future directive-type memorandum.

All Services shall establish the capability of a Victim Advocate to respond to each report of sexual assault. The Victim Advocate shall be notified and assigned immediately upon receipt of each report of sexual assault. The term Victim Advocate will be used as a standard term throughout DoD and will be directly accountable to the Sexual Assault Response Coordinator. The Victim Advocate can be a paid position, volunteer or staff assigned as a collateral duty and will be trained in providing advocacy for victims of sexual assault. The Services will establish screening and qualification standards for the Victim Advocate. Guidance on training standards for the Victim Advocate will be provided in a future directive-type memorandum. The victim advocate shall provide crisis intervention, referral and ongoing non-clinical support to the victim of a sexual assault. Support will include providing information on available options and resources so the victim can make informed decisions about their case. The advocate shall ensure that the guidance provided to the victim of sexual assault is accurate and comprehensive. The advocate will accompany the victim, at the victim's request, during investigative interviews and medical examinations. The advocate services should continue until the victim identifies they no longer need the support.

All Services shall establish guidelines for sexual assault response capability. The Services must provide a 24 hour/7 day a week sexual assault response capability for all locations, to include deployed locations. In a Joint environment, the Joint Task Force Commander will designate an executive agent to provide timely response capability in his or her area of responsibility. The guidelines will include the identification of first responders and define rapid response times to a reported sexual assault. First responders shall include law enforcement, Victim Advocates, Military Criminal Investigative Organization (NCIS, CID, OSI), and health care providers. The guidelines will also include the establishment of a multi-disciplinary case management group. The Services will ensure continuity of care and case management in the event that the victim has a permanent change of station, is deployed or discharged.

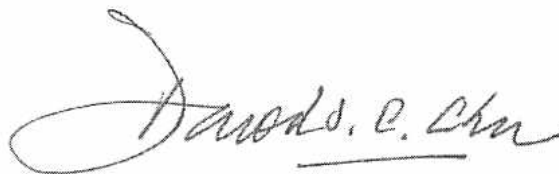
The multi-disciplinary case management group shall be convened by the Sexual Assault Response Coordinator on a monthly basis to review cases, improve reporting, facilitate monthly victim updates, and discuss process improvement to ensure system accountability and victim access to quality services as needed. Each Sexual Assault Response Coordinator will identify and utilize functional area experts to serve on the multi-disciplinary case management group. This group shall consist of the following military or civilian professionals from either the installation or local community services:

- 1) Victim Advocate
- 2) Military Criminal Investigative Organization (i.e., Defense Criminal Investigative Service, Naval Criminal Investigative Service, United States Army Criminal Investigation Command, or Air Force Office of Special Investigations)
- 2) Law Enforcement—Military Security and/or civilian police services
- 3) Health Care Providers
- 4) Mental Health/Counseling Services
- 6) Chaplains
- 7) Command Legal Counsel
- 8) Victims' Commander

The Sexual Assault Response Coordinator will be responsible for ensuring that the disciplines participating in the case management of sexual assault receive appropriate training. Guidance on training standards for a multi-disciplinary case management group will be provided in a future directive-type memorandum.

All Military Services shall submit a copy of the implementing guidance associated with conforming to the requirements outlined in this policy not later than 1 February 2005. My POC for this action is Brigadier General K.C. McClain, Commander, Joint Task Force for Sexual Assault Prevention and Response.

This guidance establishes DoD policy on sexual assault matters. This memorandum is effective immediately. This and other sexual assault policies will be consolidated into a DoD issuance within 180 days.

A handwritten signature in cursive script, reading "David S. C. Chu". The signature is written in dark ink and is positioned above the printed name.

David S. C. Chu



DEPUTY SECRETARY OF DEFENSE

1010 DEFENSE PENTAGON
WASHINGTON, DC 20301-1010



MAR 16 2005

MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS
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SUBJECT: Confidentiality Policy for Victims of Sexual Assault (JTF-SAPR-009)

This directive-type memorandum establishes Department of Defense (DoD) guidelines for confidential, restricted reporting by victims of sexual assault. This memorandum implements Section 577(b) (5) of the Ronald W. Reagan National Defense Authorization Act for Fiscal Year 2005, P. L. 108-375, October 28, 2004, which requires that DoD policy address confidential reporting of incidents of sexual assault. For the purposes of this policy, confidentiality or confidential reporting is defined as allowing a member of the DoD to report a sexual assault to specified individuals. This reporting option gives the member access to medical care, counseling and victim advocacy, without initiating the investigative process.

The DoD is committed to ensuring victims of sexual assaults are protected, treated with dignity and respect, and provided support, advocacy and care. DoD policy also strongly supports effective command awareness and prevention programs, and law enforcement and criminal justice activities that will maximize accountability and prosecution of sexual assault perpetrators. To achieve these dual objectives, DoD policy prefers complete reporting of sexual assaults to activate both victims' services and accountability actions. However, recognizing that a mandate of complete reporting may represent a barrier for victims to gain access to services when the victim desires no command or law enforcement involvement, there is a need to provide an option for confidential reporting.

OSD 04154-05

Assuring privacy and providing a confidential disclosure option for sexual assault victims is critical to discharging our commitment. Sexual assault is the most under-reported violent crime in our society at large and in the military. Although the victim's decision to report is a crucial step following a sexual assault, reporting is often precluded by the victim's desire for no one to know what happened. Commanders have a responsibility to ensure community safety and due process of law, but they must also recognize the importance of protecting the privacy of victims under their command. Subject matter experts agree that a system which promotes privacy/confidentiality can have a positive impact in bringing victims forward to provide information about being assaulted.

Recognizing these DoD interests as a matter of DoD policy, service members who are sexually assaulted will now have the following reporting options:

Restricted Reporting: Restricted reporting allows a sexual assault victim, on a confidential basis, to disclose the details of his/her assault to specifically identified individuals and receive medical treatment and counseling, without triggering the official investigative process. Service members who are sexually assaulted and desire restricted reporting under this policy should report the assault to the Sexual Assault Response Coordinator (SARC) or a healthcare provider. Consistent with current policy, they may also report the assault to a chaplain. This policy on restricted reporting is in addition to the current protections afforded privileged communications with a chaplain, and does not alter or affect those protections. Healthcare providers will initiate the appropriate care and treatment, and report the sexual assault to the SARC in lieu of reporting the assault to law enforcement or the command. Upon notification of a reported sexual assault, the SARC will immediately assign a Victim Advocate (*See, Under Secretary of Defense (Personnel and Readiness) Memorandum "Response Capability for Sexual Assault, December 17, 2004*). The assigned Victim Advocate will provide the victim accurate information on the process to include the process of restricted vice unrestricted reporting. Additionally, with the victim's consent, the healthcare provider, if appropriately trained and supervised, shall conduct a forensic medical examination, which may include the collection of evidence. In the absence of a DoD provider, the victim will be appropriately referred for the forensic examination. The victim will acknowledge in writing his or her understanding that restricted reporting may limit the ability of the government to prosecute the assailant and an understanding of the reasons DoD policy favors unrestricted reporting.

The Inspector General of the Department of Defense, in coordination with the Assistant Secretary of Defense (Health Affairs), shall establish, within 30 days from the date of this signed memorandum, guidelines for the collection and preservation of evidence, with non-identifying information about the victim, under the restricted reporting process.

Restricted reporting is intended to give a victim additional time and increased control over the release and management of his/her personal information, and to empower him/her to seek relevant information and support to make more informed decisions about participating in the criminal investigation. A victim who receives appropriate care and treatment, and is provided an opportunity to make an informed decision about a criminal investigation is more likely to develop increased trust that his/her needs are of primary concern to the command and may eventually decide to pursue an investigation. Even if the victim chooses not to pursue an official investigation, this additional reporting avenue gives commanders a clearer picture of the sexual violence within their command, and enhances a commander's ability to provide an environment which is safe and contributes to the well-being and mission-readiness of all of its members.

Unrestricted Reporting: A service member who is sexually assaulted and desires medical treatment, counseling and an official investigation of his/her allegation should use current reporting channels, e.g. chain of command, law enforcement or he/she may report the incident to the SARC. Upon notification of a reported sexual assault, the SARC will immediately assign a Victim Advocate (*See, Under Secretary of Defense (Personnel and Readiness) Memorandum "Response Capability for Sexual Assault, December 17, 2004*). Additionally, with the victim's consent, the healthcare provider shall conduct a forensic medical examination, which may include the collection of evidence. Details regarding the incident will be limited to only those personnel who have a legitimate need to know.

Regardless of whether the member elects restricted or unrestricted reporting, confidentiality of medical information will be maintained in accordance with DoD 6025.18-R, "DoD Health Information Privacy Regulation," January 2003. In cases where a victim elects restricted reporting, the SARC, assigned Victim Advocate (whether military or civilian), and healthcare providers may not disclose covered communications to law enforcement or command authorities, either within or outside the DoD, except as provided in the exceptions below. Covered communications are oral, written or electronic communications of personally identifiable information made by a victim to the SARC, assigned Victim Advocate or to a healthcare provider related to their sexual assault. However, for purposes of public safety and command responsibility, the SARC is responsible for reporting information concerning sexual assault incidents, without information that could reasonably lead to personal identification of the victim, to command officials within 24 hours of the incident.

Exceptions to confidentiality. In cases in which members elect restricted reporting, the prohibition on disclosing covered communications to the following persons or entities when disclosure would be for the following reasons:

- Command officials or law enforcement when disclosure is authorized by the victim in writing.

- Command officials or law enforcement when disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of victim or another.
- Disability Retirement Boards and officials when disclosure by a healthcare provider is required for fitness for duty for disability retirement determinations, limited to only that information which is necessary to process disability retirement determination.
- SARC, victim advocates or healthcare provider when disclosure is required for the supervision of direct victim services.
- Military or civilian courts of competent jurisdiction when disclosure is ordered by or is required by federal or state statute. SARC, victim advocates and healthcare providers will consult with the servicing legal office in the same manner as other recipients of privileged information to determine if the criteria apply and they have a duty to obey. Until those determinations are made, non-identifying information should only be disclosed.

Healthcare providers may also convey to the command any possible adverse duty impact related to the victim's medical condition and prognosis in accordance with DoD 6025.18-R Health Insurance Portability and Accountability Act. Such circumstances however, do not otherwise warrant an exception to policy, and therefore the specific details of the sexual assault will still be treated as covered communication and may not be disclosed.

Improper disclosure of covered communications, improper release of medical information, and other violations of this policy are prohibited and may result in discipline under the Uniform Code of Military Justice, loss of credentials, or other adverse personnel or administrative actions.

In the event that information about a sexual assault is disclosed to the commander from a source independent of the restricted reporting avenues, or to law enforcement from other sources, the commander may report the matter to law enforcement and law enforcement remains authorized to initiate its own independent investigation of the matter presented. Additionally, a victim's disclosure of his/her sexual assault to persons outside the protective sphere of the persons covered by this policy may result in an investigation of the allegations.

This policy does not create any actionable rights for the alleged offender nor the victim, nor constitute a grant of immunity for any actionable conduct by the offender or the victim. Covered communications that have been disclosed may be used in disciplinary proceedings against the offender or the victim, even if such communications were improperly disclosed.

The DoD recognizes the potential impact of restricted reporting on investigations and the commander's ability to hold perpetrators accountable, and this policy decision represents the judgment that such risks have been carefully considered but were outweighed by the overall interest in providing sexual assault victims this form of support. This directive-type memorandum supercedes all regulatory and policy guidance within the Department of Defense not expressly mandated by law that are inconsistent with its provisions, or would preclude its full implementation.

This memorandum provides the framework for confidentiality. The Joint Task Force for Sexual Assault Prevention and Response, in conjunction with the Military Departments, will coordinate specific implementation details. The magnitude of this change requires extensive, in-depth training for DoD personnel and specialized training for Commanders, Victim Advocates, Sexual Assault Response Coordinators, investigators, law enforcement, chaplains, healthcare providers and legal personnel.

All Military Departments shall submit a copy of their proposed implementing guidance, whether used at the Military Department or Service level, conforming to this policy not later than 60 days from the date of this signed memorandum. My POC for this action is Brigadier General K.C. McClain, Commander, Joint Task Force for Sexual Assault Prevention and Response, 703-696-9422.

To ensure consistent application across the Military Services, this confidentiality policy will be effective 90 days from the date of this signed memorandum. Final implementation of this policy is contingent on approval by USD (P&R) of Military Department and Service policies consistent with the requirements outlined in this memorandum.

A handwritten signature in black ink, appearing to read "Paul W. Smith", with a long horizontal line extending from the end of the signature.



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SUBJECT: Collaboration with Civilian Authorities for Sexual Assault Victim
Support (JTF-SAPR-010)

This directive-type memorandum provides DoD guidance for establishing liaison and coordination between military and local civilian authorities with respect to sexual assault responses and the care of victims of sexual assault, consistent with Section 577(b) (10) of the Ronald W. Reagan National Defense Authorization Act for Fiscal Year 2005, P. L. 108-375, October 28, 2004. This guidance is part of DoD's comprehensive policy on the prevention and response to sexual assaults involving members of the Armed Forces.

It is DoD policy that military installations in the United States (and overseas, where appropriate) shall establish a formal memorandum of understanding (MOU) with local community service providers, and other Military Services, as necessary and appropriate, in order to:

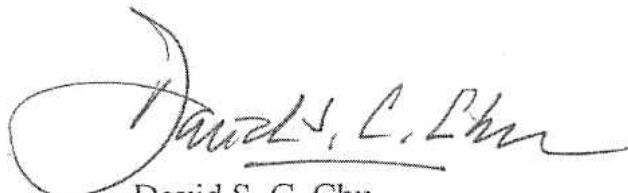
- Enhance the sharing of information concerning investigations, arrests, and prosecutions of reported sexual assault cases, as well as sexual assault care and forensic examinations involving military personnel.
- Collaborate with local community crisis counseling centers, where appropriate, in order to augment their sexual assault expertise into military training programs and to exchange non-identifying sexual assault data involving military personnel.



- Coordinate medical and counseling services between military installations, and/or deployed units, related to care for victims of sexual assault.
- Provide medical and counseling services related to care for victims of sexual assault that may not be available on military installations, but are available in the civilian community.
- Provide practical training to military sexual assault medical examiners and health providers, as needed, in order to maintain optimal readiness and ensure the same level of care is provided in deployed, overseas, and remote environments.

All Military Services shall submit a copy of the implementing guidance conforming to the requirements outlined in this policy not later than 15 February 2005. My POC for this action is Brigadier General K.C. McClain, Commander, Joint Task Force for Sexual Assault Prevention and Response.

This guidance establishes DoD policy on sexual assault matters. This memorandum is effective immediately. This and other sexual assault policies will be consolidated into a DoD issuance within 180 days.



David S. C. Chu